

IAA Number: \_\_\_\_\_

GT&C #	Order #	Amendment/Mod #
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FMS Form 7600A  
6-10

United States Government  
Interagency Agreement (IAA) – Agreement Between Federal Agencies  
General Terms and Conditions (GT&C) Section

IAA Number \_\_\_\_\_  
GT&C # \_\_\_\_\_ Order # \_\_\_\_\_ Amendment/Mod # \_\_\_\_\_

**9. Estimated Agreement Amount** (The Servicing Agency completes all information for the estimated agreement amount.)  
(Optional for Assisted Acquisitions)

Direct Cost	\$576,191.00
Overhead Fees & Charges	_____
Total Estimated Amount	\$576,191.00

Provide a general explanation of the Overhead Fees & Charges

**10. STATUTORY AUTHORITY**

**a. Requesting Agency's Authority** (Check One)

Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority

**b. Servicing Agency's Authority** (Check One)

Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority

**11. Requesting Agency's Scope** (State and/or list attachments that support Requesting Agency's Scope.)

MOA between GSA and National Parks Service (NPS) to transfer funds to NPS to cover their expenses to operate the OPO clock tower. Initial funding through 12/21/2019 with subsequent mods to be enacted as funds are available to GSA with a proposed annual budget of \$567,191

See Attached Operations Plan and Agreement

**12. Roles & Responsibilities for the Requesting Agency and Servicing Agency** (State and/or list attachments for the roles and responsibilities for the Requesting Agency and the Servicing Agency.)

See Attached Agreement

**United States Government**  
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**13. Restrictions (Optional)** (State and/or attach unique requirements and/or mission specific restrictions specific to this IAA).  
See Attached Agreement

**14. Assisted Acquisition Small Business Credit Clause** (The Servicing Agency will allocate the socio-economic credit to the Requesting Agency for any contract actions it has executed on behalf of the Requesting Agency.)

**15. Disputes:** Disputes related to this IAA shall be resolved in accordance with instructions provided in the Treasury Financial Manual (TFM) Volume I, Part 2, Chapter 4700, Appendix 10; Intragovernmental Business Rules.

**16. Termination** (Insert the number of days that this IAA may be terminated by written notice by either the Requesting or Servicing Agency.)

If this agreement is canceled, any implementing contract/order may also be canceled. If the IAA is terminated, the agencies shall agree to the terms of the termination, including costs attributable to each party and the disposition of awarded and pending actions.

If the Servicing Agency incurs costs due to the Requesting Agency's failure to give the requisite notice of its intent to terminate the IAA, the Requesting Agency shall pay any actual costs incurred by the Servicing Agency as a result of the delay in notification, provided such costs are directly attributable to the failure to give notice.

**17. Assisted Acquisition Agreements – Requesting Agency's Organizations Authorized To Request Acquisition Assistance for this IAA.** (State or attach a list of Requesting Agency's organizations authorized to request acquisition assistance for this IAA.)  
See Attached Agreement

**18. Assisted Acquisition Agreements – Servicing Agency's Organizations authorized to Provide Acquisition Assistance for this IAA.** (State or attach a list of Servicing Agency's organizations authorized to provide acquisition for this IAA.)  
See Attached Agreement

**19. Requesting Agency Clause(s) (Optional)** (State and/or attach any additional Requesting Agency clauses.)  
See Attached Agreement

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**20. Servicing Agency Clause(s) (Optional) (State and/or attach any additional Servicing Agency clauses.)**  
See Attached Agreement

**21. Additional Requesting Agency and/or Servicing Agency Attachments (Optional) (State and/or attach any additional Requesting Agency and/or Servicing Agency attachments.)**  
See Attached Agreement

**22. Annual Review of IAA**

By signing this agreement, the parties agree to annually review the IAA if the agreement period exceeds one year. Appropriate changes will be made by amendment to the GT&C and/or modification to any affected Order(s).

**AGENCY OFFICIAL**

The Agency Official is the highest level accepting authority or official as designated by the Requesting Agency and Servicing Agency to sign this agreement. Each Agency Official must ensure that the general terms and conditions are properly defined, including the stated statutory authorities, and, that the scope of work can be fulfilled per the agreement.

The Agreement Period Start Date (Block 5) must be the same as or later than the signature dates.

Actual work for this IAA may NOT begin until an Order has been signed by the appropriate individuals, as stated in the Instructions for Blocks 37 and 38.

<b>23.</b>	<b>Requesting Agency</b>	<b>Servicing Agency</b>
Name	Darren J. Blue (b) (6)	Lisa Mendelson
Title	Regional Commissioner	Regional Director, NPS
Telephone Number(s)	(202) 294-1628	(202) 297-1338
Fax Number		
Email Address	darren.blue@gsa.gov	lisa_mendelson-ielmini@nps.gov
SIGNATURE		
Approval Date	12/28/2017	

IAA Number	GT&C #	Order #	Amendment/Mod #	Servicing Agency's Agreement Tracking Number (Optional)
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**FMS Form 7600B**  
04/12

# IAA Order

IAA Number \_\_\_\_\_ - \_\_\_\_\_  
 GT&C # \_\_\_\_\_ Order # \_\_\_\_\_ Amendment/Mod # \_\_\_\_\_  
 Servicing Agency's Agreement  
 Tracking Number (Optional) \_\_\_\_\_

<b>28. Order Line/Funding Information</b>										<b>Line Number</b> _____							
<b>Requesting Agency Funding Information</b>										<b>Servicing Agency Funding Information</b>							
ALC		47000017								14100099							
Component TAS Required by 10/1/2014	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB		SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB
OR Current TAS format		47X4542.1								14X1039							
BETC		DISB								COLL							
Object Class Code (Optional)																	
BPN																	
BPN + 4 (Optional)																	
Additional Accounting Classification/Information (Optional)		2019.192X.P1124001.PG61.PGA 61.J74.PX0016602								XXXP1039R6//PPNCNAMA2A//PRCNFNFR6.XZ0 000//PR.RNAMAOPT9.00.1							
Requesting Agency Funding Expiration Date MM-DD-YYYY										Requesting Agency Funding Cancellation Date MM-DD-YYYY							
<b>Project Number &amp; Title</b>																	
<b>Description of Products and/or Services, including the Bona Fide Need for this Order</b> (State or attach a description of products/services, including the bona fide need for this Order.) MOA between GSA and National Parks Service (NPS) to transfer funds to NPS to cover their expenses to operate the OPO clock tower. Initial funding through 12/21/2019 with subsequent mods to be enacted as funds are available to GSA with a proposed annual budget of \$567,191 STATUTORY AUTHORITY: Economy Act																	
North American Industry Classification System (NAICS) Number (Optional) _____																	
<b>Breakdown of Reimbursable Line Costs</b>										<b>OR Breakdown of Assisted Acquisition Line Cost:</b>							
Unit of Measure								Contract Cost		\$							
Quantity	Unit Price	Total						Servicing Fees		\$							
3 months	\$48,015.92	\$ 144,047.76						Total Obligated Cost		\$ 0.00							
Overhead Fees & Charges		\$						Advance for Line (-)		\$							
Total Line Amount Obligated		\$ 144,047.76						Net Total Cost		\$ 0.00							
Advance Line Amount (-)		\$						Assisted Acquisition Servicing Fees Explanation									
Net Line Amount Due		\$ 144,047.76															
<b>Type of Service Requirements</b>																	
<input checked="" type="checkbox"/> Severable Service <input type="checkbox"/> Non-severable Service <input type="checkbox"/> Not Applicable																	

## IAA Order

IAA Number \_\_\_\_\_ - \_\_\_\_\_  
GT&C # \_\_\_\_\_ Order # \_\_\_\_\_ Amendment/Mod # \_\_\_\_\_  
Servicing Agency's Agreement  
Tracking Number (Optional) \_\_\_\_\_

### 29. Advance Information (Complete Block 29 if the Advance Payment for Products/Services was checked "Yes" on the GT&C.)

Total Advance Amount for the Order \$ \_\_\_\_\_ [All Order Line advance amounts (Block 28) must sum to this total.]

Revenue Recognition Methodology (according to SFFAS 7) (Identify the Revenue Recognition Methodology that will be used to account for the Requesting Agency's expense and the Servicing Agency's revenue)

- ☐ Straight-line – Provide amount to be accrued \$ \_\_\_\_\_ and Number of Months \_\_\_\_\_
- ☐ Accrual Per Work Completed – Identify the accounting posting period:
- ☐ Monthly per work completed & invoiced
- ☐ Other – Explain other regular period (bimonthly, quarterly, etc.) for posting accruals and how the accrual amounts will be communicated if other than billed. \_\_\_\_\_

### 30. Total Net Order Amount: \$ 144,047.76

[All Order Line Net Amounts Due for reimbursable agreements and Net Total Costs for Assisted Acquisition Agreements (Block 28) must sum to this total.]

### 31. Attachments (State or list attachments.)

- ☐ Key project and/or acquisition milestones (Optional except for Assisted Acquisition Agreements)

- ☒ Other Attachments (Optional)

See Annual Operating Plan attached as referenced in the Interagency Agreement between both parties

## BILLING & PAYMENT INFORMATION

### 32. Payment Method (Check One) [Intra-governmental Payment and Collection (IPAC) is the Preferred Method.]

If IPAC is used, the payment method must agree with the IPAC Trading Partner Agreement (TPA).

- ☐ Requesting Agency Initiated IPAC ☒ Servicing Agency Initiated IPAC
- ☐ Credit Card ☐ Other – Explain other payment method and reasoning \_\_\_\_\_

### 33. Billing Frequency (Check One)

[An Invoice must be submitted by the Servicing Agency and accepted by the Requesting Agency BEFORE funds are reimbursed (i.e., via IPAC transaction)]

- ☒ Monthly ☐ Quarterly ☐ Other Billing Frequency (include explanation) \_\_\_\_\_

### 34. Payment Terms (Check One)

- ☒ 7 days ☐ Other Payment Terms (include explanation): \_\_\_\_\_

# IAA Order

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 Tracking Number (Optional) \_\_\_\_\_

## 35. Funding Clauses/Instructions (Optional) (State and/or list funding clauses/instructions.)

## 36. Delivery/Shipping Information for Products (Optional)

Agency Name	
Point of Contact (POC) Name & Title	
POC Email Address	
Delivery Address /Room Number	
POC Telephone Number	
Special Shipping Information	

## APPROVALS AND CONTACT INFORMATION

### 37. PROGRAM OFFICIALS

The Program Officials, as identified by the Requesting Agency and Servicing Agency, must ensure that the scope of work is properly defined and can be fulfilled for this Order. The Program Official may or may not be the Contracting Officer depending on each agency's IAA business process.

	Requesting Agency	Servicing Agency
Name	Shawn Proctor	Paul Ollig
Title	Branch Chief	Chief, Visitor Services
Telephone Number	(202) 306-7928	(202) 603-8974
Fax Number		
Email Address	Shawn.Proctor@gsa.gov	paul_ollig@nps.gov
SIGNATURE	SHAWN PROCTOR <small>Digitally signed by SHAWN PROCTOR Date: 2018.12.21 09:20:34 -05'00'</small>	
Date Signed		

**38. FUNDING OFFICIALS** - The Funds Approving Officials, as identified by the Requesting Agency and Servicing Agency, certify that the funds are accurately cited and can be properly accounted for per the purposes set forth in the Order. The Requesting Agency Funding Official signs to obligate funds. The Servicing Agency Funding Official signs to start the work, and to bill, collect, and properly account for funds from the Requesting Agency, in accordance with the agreement.

	Requesting Agency	Servicing Agency
Name	Kevin J Ward	Lee Smith
Title	Supervisory Budget Analyst	Acting Financial Manager
Telephone Number	(202) 525-9277	(202) 245-4677
Fax Number		
Email Address	kevin.ward@gsa.gov	lee_smith@nps.gov
SIGNATURE		
Date Signed		



# IAA Order

IAA Number \_\_\_\_\_ - \_\_\_\_\_  
 GT&C # \_\_\_\_\_ Order # \_\_\_\_\_ Amendment/Mod # \_\_\_\_\_  
 Servicing Agency's Agreement  
 Tracking Number (Optional) \_\_\_\_\_

## CONTACT INFORMATION

### FINANCE OFFICE Points of Contact (POCs)

The finance office points of contact must ensure that the payment (Requesting Agency), billing (Servicing Agency), and advance/accounting information are accurate and timely for this Order.

39.	Requesting Agency (Payment Office)	Servicing Agency (Billing Office)
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		

### 40. ADDITIONAL Points of Contacts (POCs) (as determined by each Agency)

This may include CONTRACTING Office Points of Contact (POCs).

	Requesting Agency	Servicing Agency
Name	Darryl Speller	
Title	Supervisory Building Manager	
Office Address	1200 Pennsylvania Ave N.W. Washington DC, 20004	
Telephone Number	(202) 603-4877	
Fax Number		
Email Address	Darryl.Speller@gsa.gov	
Signature & Date (Optional)		
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		

